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Borough of Kendal

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ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1955

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LIVERPOOL

C. TINLING AND COMPANY, LIMITED, PRINTERS, 53, VICTORIA STREET

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*To the Mayor, Aldermen and Councillors of the Borough of Kendal.*

SIR, LADIES AND GENTLEMEN,

I have the honour to submit to you my Annual Report upon the health of the Borough during the year 1955.

Beneath the shadow of thermonuclear clouds the pessimists amongst us brood on cigarettes and diesel fumes producing cancer, and the ever-mounting cost of Britain's fairytale health service.

But the optimists see the recent victories of medicine, the opportunities for prevention, the way to a future which we believe will exist. One has to choose between mud and stars.

I wish to acknowledge the help and ready co-operation of my colleague the County Medical Officer of Health, and also the assistance afforded to me by the local general medical practitioners.

I am indebted also to the Chief Sanitary Inspector and his staff for the spirit of teamwork which exists in my department, and for the fund of local knowledge which they have laid at my disposal.

I have the honour to be,

Sir, Ladies and Gentlemen,

Your obedient servant,

FRANK T. MADGE,

Medical Officer of Health.



# **NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.**

Area of the Borough in acres	...	...	...	...	3,705
Population (Registrar-General's mid year estimate)	...	...	...	...	18,460
Inhabited Houses	...	...	...	...	6,087
Rateable Value	{	old valuation	...	...	£150,673
		new valuation	...	...	£241,755
Product of a Penny Rate	{	old valuation	...	...	£600
		new valuation	...	...	£975
Rate in the pound levied in 1955/56 on old valuation	...	...	...	...	24/2d.
Of which the County Rate was	...	...	...	...	19/6d.

Kendal is picturesquely situated in the valley of the River Kent, the greater part being on the west bank built on ground rising steeply in a series of terraced streets up Kendal Fell to about 500 feet above sea level. The buildings on the east bank are situated on undulating lowlands rising from 137 feet to 200 feet contour. The dale of Kendal runs north to south with the level of the eastern boundary varying between 500 and 600 feet and the western boundary between 300 and 600 feet above sea level.

The geology of the Borough is sharply divided by the Fellside. The steep eminence of Kendal Fell on the west is composed of carboniferous limestones which represent remains of the dome which once covered the Lake District, and the sharp division is caused by a fault in this system. To the east of this fault denudation has taken place and the out-cropping rocks are Kirkby Moor Flags of the Upper Ludlow Series of the Silurian System. Alluvial deposits and some Basement Conglomerates form the small northern area of the Borough.

The climate is mild and invigorating, the town is sheltered by the Fell from the prevailing westerly winds, and the open aspect to the south provides full access to sunlight. Temperature gradient inversions are frequent at night but are soon dispelled in the mornings. The rainfall normally varies between 50 and 55 inches a year and light falls of snow may be expected for one or two weeks in the late winter. The low-lying land in the north of the Borough is liable to flooding when the River Kent is in spate, but the town remains comfortably dry and free from mist or fog.

Economically Kendal serves a treble function. Primarily it is a market town, being situated in the heart of the southern portion of Westmorland and the centre of a large agricultural community within a radius of some eight miles. Secondly it is an important stopping place on the main A.6 road, where the heavy volume of motor traffic from the South divides into the portion destined for Scotland over Shap, and the

portion heading for the Lake District. The former includes a high proportion of heavy lorry traffic which uses Kendal as a regular overnight staging point, and the latter includes a very seasonal peakload of tourist traffic. Thirdly Kendal has become an important centre for light industries which have guaranteed constant employment to the inhabitants and brought considerable prosperity to the town.

The local industries include a wide variety of manufacturing processes, the chief of which are :—

Boot and Shoe Manufactory.	Tobacco and Snuff Manufactories.
Woollen Mills.	Breweries.
Engineering Works.	Carpet Manufactory.
Hosiery and Shirt Manufactories.	Stone and Lime Works.

In addition there are ample opportunities for employment in the shops, cafés, hotels, business premises, and launderies. At Oxenholme the inhabitants are mainly interested in the railway employment. The variety of these opportunities for both men and women has kept Kendal happily free from general unemployment and provided that economic security and prosperity which is a most important factor in the maintenance of the public health.

**STAFF.**

Name.	Qualifications.	Office.	Whole or Part Time.	Other Offices.
F. T. Madge ...	M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.	Medical Officer of Health	Part	M.O.H. Combined County Districts of Westmorland
W. B. G. Rigg ...	M.R.San.I., Cert.S.I.B.	Chief Sanitary Inspector	Whole	—
J. H. Major ...	M.S.I.A., Cert.S.I.B.	Additional Sanitary Inspector	Whole	—
W. F. Mandle ...	A.R.San.I., Cert.S.I.B.	Additional Sanitary Inspector	Whole	—
C. Gibson ...	—	Clerk	Whole	—
B. M. Machell ...	—	Clerk to Medical Officer of Health	Part	Clerk to M.O.H. Combined County Districts of Westmorland

**Staff Changes.**

There were none during the year.

**COMMITTEES.**

The Minister of Health requires me to include a list of your Council's committees which are concerned with matters of public health.

The Health Committee deal with the principal matters, but there are other aspects of public health importance which are dealt with by the Water, Property and Streets and Sewerage Committees.

### VITAL STATISTICS.

The following extracts are made from information supplied by the Registrar-General, with figures for 1954 for comparison :—

Area of the District in acres      ...      ...      ...      ...      3,705

						1954	1955	
Estimated civilian population (mid-year) ...						18,490	18,460	
Live Births.	Legitimate—	Males	...	...		106	127	
		females	...	...		121	116	
	Illegitimate—	males	...	...		5	7	
		females	...	...		5	7	
	Total		...	...		237	257	
	Crude rate per 1,000 population ...					12.8	13.9	
	Corrected Rate per 1,000 population					12.8	13.9	
	Rate for England and Wales ...					15.2	15.1	
Stillbirths.	Legitimate—	males	...	...		2	2	
		females	...	...		3	—	
	Illegitimate—	males	...	...		—	—	
		females	...	...		—	—	
	Total		...	...		5	2	
	Rate per 1,000 total (live and still)							
	births		...	...	...		20.6	7.7
	Rate for England and Wales ...					24.0	23.1	
Deaths.	Males	...	...	...	...	105	103	
	Females	...	...	...	...	107	114	
	Total	...	...	...	...	212	217	
	Crude rate per 1,000 population ...					11.5	11.7	
	Corrected rate per 1,000 population ...					10.3	10.6	
	Rate for England and Wales ...					11.3	11.7	
Infantile Deaths (under 1 year)—								
Legitimate		...	...	...	...	3	10	
Rate per 1,000 legitimate live births...						13.2	42.9	
Illegitimate		...	...	...	...	1	—	
Rate per 1,000 illegitimate live births						100	—	
Total Deaths under 1 year					...	4	10	
Rate per 1,000 live births					...	16.8	38.9	
Rate for England and Wales					...	25.5	24.9	



	1954	1955
Neo-natal Deaths (under 1 month)		
Total Neo-natal Deaths ... ..	4	6
Rate per 1,000 live births ... ..	16.8	23.3
Rate for England and Wales ... ..	—	17.3
Maternal Mortality		
Total Deaths ... ..	1	—
Rate per 1,000 total (live and still) births ... ..	4.1	—
Rate for England and Wales ... ..	0.69	0.64

Deaths from certain causes :—

	1954	1955
Cancer ... ..	35	38
Measles ... ..	Nil	Nil
Whooping Cough ... ..	Nil	Nil

The main causes of death were :—

Heart Disease ... ..	70
Vascular lesions of nervous system ...	42
Cancer ... ..	38

## COMMENTARY ON THE VITAL STATISTICS

### Population.

Your population at the 1951 Census was 18,541 made up of 8,521 males and 10,020 females. This was an increase of 2,225, or 13.6% over the previous census in 1931. Only some 2.6% of that increase was due to the excess of births over deaths and the net balance of 11% was due to people from outside coming to live in Kendal. The town has shown this steady growth for many decades, and its rate has been kept in check mainly by the current shortage of houses from time to time.

The 1951 Census showed that the day population of the Borough was 19,074 and that there was a daily tidal flow of 2,322 persons. Kendal was a day workplace for 1,518 people who came in from their homes in the surrounding area, 971 men and 547 women.

The location of Kendal's dormitory areas is perhaps worth noting. 904 of the commuters came in from South Westmorland, made up of 555 men and 349 women. Windermere sent a daily quota of 228 people to work in Kendal, comprising 164 men and 64 women. Lakes Urban District contributed another 60 workers, being 42 men and 18 women. The small remaining proportion came from Lancashire and other foreign parts.

In return for the incoming bus loads, Kendal sent out each day 804 people to work outside the Borough boundary, 599 men and 205 women. South Westmorland provided work for 570 of them, made up of 419 men and 151 women. Windermere took 57 comprising 42 men and 15 women. Lancashire absorbed 91 people, being 79 men and 12 women.

This daily interchange of talent must hide many a human story, many a difficult housing problem, and many reflections of the changing face of England, even in this small corner of the land.

The 1951 Census also revealed the very interesting point that only some 55 per cent of the population of Westmorland were born in the county. The greatest invasion was from Lancashire, with about 14 per cent and Cumberland contributed about 8 per cent. True to Border tradition the number of Scots has been kept down to a bare 2 per cent, although no doubt many more pass through to more remunerative fields in the south. All these population statistics have a bearing upon the public health.

### Birth Rate.

The birth rate was still appreciably below the national level. There were 40 more births than deaths in 1955 and 20 more than in the previous year.

### **Death Rate.**

The death rate is much the same as the average for the rest of England and Wales, and the general downward trend of the past 100 years is being maintained. The proportion of old persons in your community is likely to increase markedly during the next decade. It is problematical whether the death rate will catch up with them before the impact of ionising radiations overtakes the general population.

### **Infantile Deaths.**

The infantile death rate in 1955 showed a lapse on the improvement of the previous year, but it was not as high as in many of the post-war periods. Six out of the ten deaths were in the neonatal period.

In spite of the setback of recent years your long term trend has been downwards and there are signs that we are approaching the hard core of "unavoidable" infant deaths. It does not appear likely that science will be able to prevent developmental abnormalities, but there are high hopes that blood tests and the increased availability of obstetrical specialists will help to reduce the number of neo-natal deaths. The general trend reflects an improvement in child care by the local doctors, nurses and, above all, by the young mothers in their homes.

An advisory obstetric committee has been set up in Westmorland to co-ordinate the functions of the three divisions of the health services involved in midwifery, and to investigate the causes of stillbirths and infant deaths.

### **Maternal Mortality.**

There were happily none during the year.

## **PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES.**

*Public Health Act, 1936. Sections 143-170.*

*National Health Service Act, 1946. Part III.*

The general incidence of illness can be assessed by the weekly number of new claims for sickness benefit at our local National Insurance offices. A logarithmic graph of those figures shows a regular seasonal pattern over the years, and any variations are usually worth investigating. The general level is some measure of the local community health, and the extent of incapacity can be periodically gauged by noting the remarkable drop in claims in weeks which happen to include a public holiday.



1955 opened with a high level of general illness, a continuation of the undue rise in the autumn of 1954. Peoples' resistance to colds, influenza and other respiratory infections had been depressed by the wet and cheerless summer of 1954, so that the usual February winter-time peak of sickness had already been reached before the start of 1955. The early months of the new year stayed high and had a final outburst of illness in March. Easter was the real turning point, the sun peeped through, and during the following glorious summer we all had a chance to dry out our bones and our houses. All through the autumn and early winter we enjoyed good health and good weather. I am sure that the two go together.

But whatever may have been the general sickness, the incidence of notifiable diseases kept remarkably low all through 1955. Even measles missed its customary cyclical arrival and stayed over the other side of the mountains in North Westmorland. We had a small scare in the autumn over a case of typhoid just outside the Borough boundary, and had to trace a lot of contacts in Kendal. Although not proven, it seems likely that we had one clinical case. One case of poliomyelitis occurred in October, but luckily there was no further spread. Polio is certainly a dreadful disease, but it is apt to receive more flesh-creeping publicity than its attack rate and usual outcome really warrant. I wish we knew more about how it is carried from one person to another, because then we might be able to stop it. Immunisation may be available next year.

It is pleasing to record that the notification of infectious diseases has much improved in recent years, and I am very grateful to my colleagues in general practice for their prompt help in this respect. I look upon the control of notifiable diseases as one of the most important duties of our department. Patterns of thought change from time to time on these subjects, but the notifications provide the factual basis for controlling the spread of infections.

### **Whooping Cough.**

Whooping cough is being brought under control with depressing slowness. Artificial immunisation has been available for well over ten years and has been privately sought for the children by most of the intelligent parents in the country. The delay lies in its recommendation to that section of the community who have come to rely upon centrally inspired propaganda to direct their way of life. Although the antibiotic drugs have reduced the complications, whooping cough remains a very lethal illness during the first few months of life, and a

very distressing affliction at all ages. I believe that it could be virtually wiped out with a little more popular understanding and a lot more effort.

### **Measles.**

Measles remains a disease which visits the area with periodical regularity. No effective artificial immunisation is yet available but the use of antibiotic drugs has greatly reduced the incidence of pneumonia and ear disease complications in measles. It is in the first year of life that measles is such a deadly disease, so every effort should be made to keep babies away from infection. At one time "measles tea parties" were popular as a means of getting a family through the illness all at once, but it was hard on the younger members, and I would say that the longer you can put off having measles, the better will be the chances of complete recovery.

### **German Measles.**

German measles is not notifiable, so I do not know how many cases occurred. Expectant mothers who contract german measles during the early part of pregnancy run an added risk of their children being born deaf, so it seems quite a good idea to get over this mild illness during school days, because the odds are that most people catch german measles some time in their lives.

### **Scarlet Fever.**

Scarlet fever has been insignificant for many years and the illness is now normally nursed at home. Its continuance as a separate entity can hardly be justified, for it is merely one manifestation among many of infection with the haemolytic streptococcus organisms. The antibiotic drugs now cut short its progress and prevent its complications. I believe that scarlet fever should cease to be notifiable.

### **Diphtheria.**

Diphtheria has not occurred since 1945. Artificial immunisation appears to have almost abolished diphtheria and I hope that serious epidemics of this deadly disease have been banned for all time. I wish to thank the local doctors and nurses for their efforts to secure artificial immunisation of every baby before the first birthday and the school medical officers for their part.



NOTIFIABLE DISEASES TABLE.

DISEASE.	Total.	Ages										Admitted to Hospital	Deaths.	
		-1	1-	2-	3-	4-	5-	10-	15-	20-	35-			45-
Scarlet Fever ...	2	—	—	—	—	—	I	—	—	I	—	—	—	—
Acute Poliomyelitis (paralytic) ...	I	—	—	—	—	—	—	—	—	I	—	—	—	I
Dysentery... ..	2	I	—	—	—	I	—	—	—	—	—	—	—	—
Erysipelas... ..	2	—	—	—	—	—	—	—	—	—	I	I	—	—
Food Poisoning ...	3	—	—	—	—	—	—	—	—	—	—	—	3	—
Measles ... ..	4	—	—	I	I	2	—	—	—	—	—	—	—	—
Whooping Cough ...	6	—	—	—	2	—	3	I	—	—	—	—	—	—
TOTAL ... ..	20	I	—	I	3	3	4	I	—	2	—	I	4	I

### **Smallpox.**

Smallpox swept this countryside from time to time until some 50 years ago, when widespread vaccination checked its progress and vigilance at the sea ports prevented its importation. A generation has grown up which is blinded by the complacency of false security, not yet realising that air travel has made smallpox once more a very real risk to the community. Persons from abroad, who may be incubating the disease, arrive in this country well within the incubation period. It is most important that all children should be vaccinated in infancy, and that adults should keep themselves protected, rather than rush in belated panic for mass vaccination when an outbreak occurs. The present low vaccination state of the population is inviting trouble from this disfiguring and often fatal disease. I cannot stress too strongly the wisdom of taking obvious precautions against preventable diseases.

### **TUBERCULOSIS.**

Tuberculosis is the most important communicable disease of our time. Its prevention is primarily dependent upon social and economic factors in the general community, and secondarily upon the management of the established case. Your Council's functions are three-fold ; to investigate the source of infection, to prevent the spread of infection, and to remove conditions favourable to infection.

Investigation of the source of infection relies upon notification. Inquiries are made into the home and working conditions of the patient and into any outside possible sources of infection. Additional assistance is provided by the mass miniature radiography units of the Regional Hospital Boards, which offer free X-ray examination in each locality from time to time, and not only reveal the infectious cases but enable early cases to be offered the best possible chances of recovery. I regard the value of these X-ray visits as very great and I only wish that they could come more often.

Preventing the spread of infection depends mainly upon the management of the established case. Ideally, the infectious patient should be isolated, but if isolation in hospital is denied, reliance has to be placed on education of the patient in personal precautions, and your Council endeavour to ensure that the home conditions are such that an infectious patient is not compelled to share a bedroom with other members of the family who are still healthy, and where possible to re-house young families who are sharing a house with infectious tuberculosis patients—rather an inadequate and pathetic makeshift.

TUBERCULOSIS TABLE.

Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	—	—	—	—	—	—	—
5	—	—	1	1	—	—	—	—
15	3	1	—	1	—	—	—	—
25	1	—	—	—	1	1	—	—
35	—	—	1	1	—	—	—	—
45	1	—	—	—	—	—	—	—
55	2	—	—	—	—	—	—	—
65	—	1	—	—	—	—	—	—
TOTAL ...	7	2	2	3	1	1	—	—

Of the cases notified 4 were transfers from other areas.

The number of tuberculosis patients on the register at the year end were :—

Respiratory ...	...	121
Non-Respiratory ...	...	15
		<hr/>
		136
		<hr/>



Prevention of tuberculosis extends beyond the home. Your Council have the duty of ensuring that an infectious patient is not employed in dairying or food handling, and persuasion is occasionally needed to avoid the undesirability of such a patient carrying on certain other employment which would create an especial risk to susceptible contacts. In many other workplaces control is impotent and spread may be unchecked. Perhaps immunisation with B.C.G. vaccine may protect susceptibles.

Removing conditions favourable to infection embraces the whole range of environmental preventive medicine. Housing and nutrition are probably the major factors. Slum clearance, reconditioning of houses, relief of overcrowding are the first steps, for tuberculosis thrives in damp, dark, congested dwellings, whether they may be sited in an urban slum or rural solitude. Nutrition is undoubtedly significant in the prevention of infection and in the early arrest of tuberculosis. Protective foods are expensive to buy, medical treatment is free.

The increase in attested herds, the eradication of tuberculous cattle, and systematic meat inspection are making notable progress in removing conditions favourable for bovine infection to be transmitted to man.

The supervision of dusty trades under the Factories Act reduces the risk of lung damage which may predispose to tuberculous infection, and the workers in these occupations are especially surveyed by the X-ray units.

Recent years have seen most encouraging progress in the treatment of pulmonary tuberculosis, but we have a long way to go yet in the preventive field. Your Council have therefore very considerable responsibilities in accepting the challenge of tuberculosis.

### **Hospital and Ambulance Arrangements for Infectious Diseases.**

*National Health Service Act, 1946, Parts II and III.*

Hospital accommodation for infectious diseases is provided by the Regional Hospital Board, Manchester, at Beaumont Hospital, Lancaster, a modern and well-equipped building, within easy reach of the area under modern transport conditions.

Smallpox cases will be admitted to the Ainsworth Smallpox Hospital near Bury.

Ambulance transport for cases of infectious disease is provided by the Westmorland County Council and is based in Kendal.

### **Disinfection Arrangements.**

Disinfection in connection with infectious diseases or for other public health reasons was carried out in 21 houses during the year. There is a steam disinfector at Parkside Road which is available to other local authorities and private bodies.

## HOUSING.

*The Housing Acts, 1936 and 1954.*

Under the Housing Acts your Council has a duty to consider the general housing conditions in your district, to ascertain whether any are unfit for human habitation, and to assess the need for further houses. You have powers to deal with unfit houses, powers to provide new houses for all classes, and various powers and duties in the management of your Council's housing estates. Good housing conditions are an integral part of public health.

### **Present Housing Position.**

*Housing Act, 1936. Section 57.*

The number of inhabited houses in your Borough is 6,087. With an estimated population of 18,460 the average number of persons per house is 3.0. This is not a high figure for a desirably sized family but many of the houses have only one or two occupants. At the time of the 1951 census there were 5,651 private households living in 5,441 structurally separate dwellings. It is not uncommon to find more than one family unit in each house, and although this leads to domestic and personal difficulties it usually does not constitute overcrowding within the strict definition of the Housing Act, which assumes that living rooms are used also for sleeping purposes, and that sexes can be segregated irrespective of age, health and family relationships. Assessment of overcrowding based on a minimum bedroom standard is long overdue and would provide a more realistic picture of the domestic difficulties which are reflected in the application lists for new houses ; we have neither the time nor the staff to make such a survey out of mere curiosity, and it would be out of date before it could be published. All the same it is hard to reconcile the figure of 3.0 persons per house with the large numbers of applicants for new houses. The neighbouring areas of South Westmorland and Windermere are considerably used as dormitories for Kendal, and this overspill factor complicates the complete picture of housing in the Borough. The figure for daily movements at the time of the 1951 census are set out in the vital statistics commentary of this report.

Over half the houses are of relatively recent construction, built since the end of the 1914-18 war. About one-third of the total houses in the Borough are municipally owned and provided with modern amenities. It can also be assumed that the others built by private enterprise in this period are similarly of good quality.



About another 40 per cent. of the houses were built before 1920, but appear to be structurally sound, and most of them have modern amenities. A few are poorly arranged on account of their proximity to bad property.

The rest of the houses include a lot of very old property in poor structural condition and badly arranged. In addition to their disrepair and sunless congested position in ill-paved yards, they lack the essential amenities of separate sanitary accommodation, hot-water systems, baths, cooking facilities, food stores and separate gardens or yards. Most of them will soon be swept away.

### **General Progress of Slum Clearance and Improvements.**

Westmorland as a whole has made very encouraging progress in post-war slum clearance despite all the difficulties of the times. Since the campaign was resumed in 1948 well over 540 houses in the County have been dealt with by formal action under the Housing Acts. Most of these will eventually be demolished or converted to trade use, but about 15 per cent. of them have been reprieved by their owners undertaking to spend considerable money for comprehensive reconditioning up to modern standards. In addition to those formal actions there have been a very creditable number of informal schemes for the renovation of sub-standard houses, either with the aid of improvement grants or entirely by private enterprise. The aim is to save a house wherever possible, but if it cannot be brought up to an acceptable standard of safety, decency and amenity the sooner it is swept away the better.

The autumn of 1948 saw the resumption of post-war slum clearance in both Kendal Borough and South Westmorland Rural District, the two associated areas which I had to consider together on account of the overspill factors. I prepared a slum clearance policy which aimed at dealing with an average of 20 houses per year in each of the two districts, the phasing to be adjusted according to tactical considerations.

I chose the figure of 20 condemnations per year because each area was planning to build 100 new houses per year by the combined efforts of the Council and private enterprise. It aimed at condemning one slum house for every five new houses built. The new building rate was maintained at an average of 100 houses per year, so slum clearance kept pace in its 1 to 5 ratio. So much for the strategy.

The phasing of slum clearance was handled on a tactical basis, and the timing was adjusted to suit the ability of our various departments to undertake the work without upsetting the balance of our other duties, the changes in the pace of new building and reletting, the foreshadowing

of legislation to recondition old houses, and the Town and Country Planning policies for future re-development.

That slum clearance policy was maintained and yielded the estimated results. There was of course the inevitable time lag in rehousing and physical clearance, but that record of 7 years of solid, post-war achievement in slum clearance reflects great credit upon Kendal Borough and South Westmorland Rural District, as it was made in very difficult times, and we are now in the happy position of having a flying start over most of the rest of Britain.

The opportunities afforded by improvement grants may save many houses which otherwise will become condemnable during the next ten years. After allowing for the above factors, the Chief Sanitary Inspector and I estimate that 300 houses are ripe for slum clearance action within Kendal Borough. Your Council adopted that estimate and made it the basis for their formal proposals under Section 1 of the Housing Repairs and Rents Act, 1954, and the Minister of Housing and Local Government approved the Scheme during 1955.

The pace of slum clearance action during the next 10 years will be measured against the general housing need, just as it has been so measured during the past five years on a tactical basis, bearing in mind the time lag in rehousing and clearance. We have to divide the time into two periods of five years each, starting in 1955.

Financial considerations may make it expedient for as many slum houses as possible to be dealt with during the first period, and therefore priority will be given to condemning the worst of them. Within that general policy, the next point to receive consideration will be the clearance of those sites which will facilitate redevelopment of the centre of the town. As the proposed slum clearance programme proceeds, the fullest possible use will be made of the provisions for the repair of dilapidated houses, the improvement of sub-standard houses, and the conversion of suitable premises into extra houses.

I propose also to continue to co-ordinate the slum clearance programmes of Kendal Borough and the surrounding area of South Westmorland Rural District. Just as the programmes of the past five years have reached their respective targets, so I am confident that the programmes for the next ten years will meet with similar success. If the long-term strategy is sound the tactical details can remain flexible. So much for the wider aspects of slum clearance, and now follow the details of local progress in the Borough.

**Closing Orders.**

*Housing Act, 1936. Section 12.*

*Local Government Act, 1953. Section 10.*

Five closing orders were made during the year. The total number of houses subject to closing orders is 70 of which 8 relate to houses which are still occupied. Four such houses went out of use for habitation during the year.

**Undertakings not to use for Human Habitation.**

*Housing Act, 1936. Section 11.*

Four undertakings were accepted during the year.

The total number of such undertakings in force is 121 of which 19 relate to houses which are still occupied. Four such houses went out of use for habitation during the year.

**Undertakings to execute remedial works.**

*Housing Act, 1936. Sections 11 and 12.*

No offers were made for reconditioning of unfit houses under these sections of the Act. No such undertakings remain unsatisfied.

**Demolition Orders.**

*Housing Act, 1936. Section 11.*

4 demolition orders were made during the year.

The total number of outstanding demolition orders is 36 of which 13 relate to houses which are still occupied.

No houses subject to demolition orders were demolished during the year.

No such houses went out of use for habitation during the year.

**Clearance Areas.**

*Housing Act, 1936. Section 25.*

Your Council have made good progress since the war with clearance areas by compulsory purchase orders in White Lion Yard, Far Cross Bank and Captain French Lane, and by their voluntary demolition of Abbott Hall Square. Far Cross Bank clearance area No. 2 was demolished during 1953, White Lion Yard was cleared during 1954 and 1955, and by the year end the others were progressing satisfactorily. Only 10 houses awaited removal of tenants.

During 1955 seven more of the houses in confirmed clearance areas went out of use for habitation, and 13 were actually demolished.



Five clearance areas of Fellside were officially represented and declared during 1955. One was a small section of decayed property, between Jordan's granary and Sepulchre Lane, which will proceed by Clearance Order, leaving the owners to redevelop the site. The other four clearance areas more or less surround a prewar cleared zone, of which Kendal Corporation own the major part. Therefore it is proposed to purchase them. The five areas contain 54 houses, only 39 of which are occupied, and include a jumble of dilapidated and decayed property in Rosemary Lane, Rosemary Hill, Middle Lane, Sepulchre Lane and Syke Lane. Action was pending at the year end.

### **Redevelopment Areas.**

There are no outstanding specified redevelopment areas, but there are zones in the central part of the Borough which will be conveniently represented under the Town and Country Planning Act, 1947, as areas of obsolete development. If these powers are wisely applied there will be excellent opportunities for replacing the squalid jumble of decaying property by a new layout of the centre of Kendal more in keeping with the spirit of the present century. The current clearance areas proposed for Fellside offer scope for redevelopment on what is a potentially very pleasant site.

### **Estimated Requirement for New Houses.**

*Housing Act, 1949. Section 71.*

The Housing Act, 1949, enlarged the responsibilities of your Council for the provision of new houses to accommodate all classes of the community. Under the older Acts of Parliament your powers and duties were limited to what were then termed the working classes.

At the end of the war in 1945 it was estimated that your current requirement for new houses was about 750. Up to the end of 1955, 926 new houses had been built by the combined efforts of your Council and private enterprise, but the waiting-list at the year end was still about 640.

Waiting-lists need to be assessed with caution as occasional checks show some degree of inflation, but there are probably some other families which have not applied, and although many of the folk who wish to improve their way of living are included in our slum clearance programme there may be some who will have to be rehoused even if they are contented with their slum conditions.

Although it is not practicable to arrive at a precise figure for your present new housing needs I suggest that between 300 and 350 is a

probable maximum range, bearing in mind that private enterprise has now resumed its valuable contribution to individual tastes, and that it might not be desirable for the Borough to become too top-heavy with municipally subsidised houses.

### **Housing Schemes.**

*Housing Act, 1936. Section 72.*

The Sandylands Estate of 242 houses was completed during 1950. Since then your Council have been developing the Hall Garth Estate, on which 432 houses had been completed by the end of 1955, and another 58 were under construction. Contracts for a final 68 houses were placed during the year.

I would again stress the desirability of some central development with flats for old people and smaller families. The Ministry of Health's suggestion for terrace houses might be usefully applied to the central areas.

### **Building Progress.**

#### **(a) By the Local Authority.**

Since the end of the 1939-45 war and up to the 31st December, 1955, your Council completed 678 traditional houses, 40 prefabricated bungalows and 9 flats at the old isolation hospital. An additional 50 were under construction at the year end. 76 were completed during 1955.

#### **(b) By Private Enterprise.**

Post-war progress has been limited to 208 houses completed and 26 under construction. 42 of these houses were completed during 1955 and there was one dwelling made from the conversion of larger premises.

### **Tenants Selection.**

Your Council adopts the methods of selection of tenants for Corporation houses by consideration of application cards, and personal knowledge of the applicants and their needs. There is no system of points, nor is there anonymity. This results in a considerable amount of personal canvassing by the more persistent applicants.

Your Tenants Selection Committee has been most sympathetic and has rehoused certain persons upon medical grounds at my representation. The public health has incidentally been safeguarded by the removal of these cases to separate dwellings.



### **Housing Management.**

The Corporation own approximately 1,898 houses which will require increasing attention and very soon you will own nearly 2,000. Many visits were made by the Sanitary Department during the year in connection with the public health aspects of housing management on the municipal estates. The rents of your houses range between 7s. 9d. and 15s. 9d., exclusive of rates. The rateable values vary between £9 and £22.

The examination of rentals and rates may not seem at first to have much to do with public health, but it does have considerable significance. It is not unknown for persons who have been rehoused from poor quarters into modern Council houses to have to pay their rent and rates from the portion of their income which rightly belong to the purchase of food. Domestic economy can effect the general standard of the public health almost as much as environmental conditions, and some attempt must be made to maintain a balance between these conflicting factors.

### **Verminous Houses.**

*Public Health Act, 1936. Sections 83-85.*

Bed bugs were found in no houses. The Department checked the accommodation and effects of successful applicants prior to their removal to Council houses; In all cases where bed bugs were suspected the furniture and effects were removed by the Health Department and treated with cyanide before delivery. Seven removal loads from condemned houses were dealt with in that way.

420 visits were made in connection with this work. This entailed many visits outside normal working hours and the staff required much tact in this important work.

### **Nuisances and Notices.**

*Public Health Act, 1936. Sections 91-100.*

During the year 705 inspections of dwelling-houses and 310 inspections of yards were made and 249 visits were made to investigate complaints in houses. The following action resulted :—

Preliminary Notices served	...	...	193
Statutory Notices served	...	...	Nil

In no case was it necessary to obtain an Abatement Order from the Court.

**Certificates of Disrepair.**

*Housing Repairs and Rents Act, 1954. Section 26.*

Two applications for certificates of disrepair were issued to tenants who were contesting their Landlords' proposals for rent increases. Attention having been drawn to those houses in that way, both were subsequently condemned under the slum clearance provisions of the principal Act.

**Dangerous Buildings.**

*Public Health Act, 1936. Section 58.*

The operation of these provisions lies with the Borough Engineer, who reports the following action undertaken during the year :—

1 Statutory Notice was served under the Act and 5 Informal Notices were sent.

It appears probable that some of the houses subject to undertakings will have to be dealt with under these powers as they are becoming progressively derelict.

**Tents, Vans, Sheds and Moveable Dwellings.**

*Public Health Act, 1936. Sections 268-269.*

25 visits were paid concerning tents, vans, and sheds, and in every case it was moved within a few days.

There are no licensed camping sites within the Borough and no individual licence is in force.

**WATER SUPPLIES.**

*Water Act, 1945.*

Kendal has an abundant water supply from both overground and underground sources, as well as a connection to the Manchester Corporation aqueduct. In years when the rainfall is average, or better, the overground supplies usually meet the need, but they are limited by the relatively small area of the gathering grounds. The underground supply is inexhaustable, but pumping is costly and limited again by the capacity of the plant. The Manchester supply is even more costly, and the amount which may be taken is restricted by a formal agreement. In 1955 your Council instructed a firm of consulting engineers to review the whole aspect of Kendal's water supplies.

The overground sources are upland surface gathering grounds, lying to the east of the Borough, with a run off from rocks of the Kirkby

Moor Flags in the Upper Ludlow Series of the Silurian System. The Catchment Area is about 400 acres in extent, feeding all three of the reservoirs.

The main reservoir is at Fisher Tarn, which has a capacity of 117,996,000 gallons. The tarn is fed by five main runners and by springs in the floor of the reservoir.

Upper Birds Park Reservoir has a capacity of 3,000,000 gallons. Lower Birds Park reservoir has a capacity of 14,784,000 gallons. Upper Birds Park normally overflows into Lower Birds Park, but there are two 2-inch and one 6-inch siphons for use when by-washing ceases, and Lower Birds Park can also be fed by a 6-inch main from Fisher Tarn.

These three reservoirs therefore provide very generous storage capacity, amounting to about six months' supply. The annual consumption is 41 gallons per head per day, including all industrial works.

The underground source of water is at Mints Feet, which is a shallow well near the bank of the River Kent on the north of the town. The well is 55 feet by 40 feet and 5 feet depth of water at rest level, with open jointed stone linings and uncovered. It is liable to flooding by the River Kent in times of spate, and it requires weeding twice a year. This supply comes from the river and the alluvial deposits of the valley bottom, and is potentially inexhaustible. Since the removal of the river weir at Aikrigg End, the rest level of Mints Feet Well has fallen about two feet, and, when there has been a long spell of dry weather, the pumps have emptied the well faster than it refilled itself. This effect of the lowering of the local water table could no doubt be met by deepening the well.

I do not like Mints Feet Well. The safety of this supply is entirely dependent upon chlorination and there is no second line of defence. The source is dangerously polluted with sewage and surface water and I do not consider that hyphochlorination is an adequate safeguard. I would prefer to see this well abandoned, but if it is essential to retain it, I feel that its use should be restricted to dire necessity under a very strict supervision of the chlorination technique.

Following the visit in July, 1951, of an Engineering Inspector from the Ministry of Local Government and Planning, I was instructed to furnish a detailed report on the adequacy of the precautions taken to safeguard the public health from the dangers of this water supply. I presented the report in September, 1951, and at the request of the Minister your Council sought technical advice to improve the position.

Your technical advisers recommended modification in the dosing points and the installation of a second chlorinator to work in parallel with the present machine, with the introduction of an alarm system to indicate any mechanical breakdown. Your Council adopted that



advice and most of the work was completed in 1954. Naturally I am glad to see these improvements, but I would feel happier if all of them worked as presumably they were intended to. I represented to your Council again in December 1955 that the system in operation was neither in accordance with the recommendations of the Council's consultant, nor as approved by the Minister of Housing and Local Government.

I have recommended for several years that efforts should be continued to reduce the sewage pollution in the neighbourhood of this shallow well. The provision of latrines on your Council's Jubilee Playing Field would minimise the present objectionable practice of indiscriminate excretion on the ground, and similar steps are needed to improve the sanitary arrangements on the other private small sports grounds in the vicinity.

I am glad to record that the results of chlorination have been impeccable in the Mints Feet supply. A long series of routine tests have never found the distributed water unsterilised, and it is only fair to the operating staff to say so. I maintain however that there is a potential risk because one single process of treatment by hypochlorination is dependent upon avoiding both mechanical failure and human error. Both factors leave a lot to be desired. I do not share the optimism of your Council's 1955 assurances to the Minister, I have pointed out the risks, your Council now carry the responsibility and mine is correspondingly lightened.

Treatment of the overground supplies is very satisfactorily carried out by hypochlorination. Bacteriological examinations are carried out monthly and full chemical analyses are made half-yearly, and the results are set out in Appendix "A" herewith.

Safeguarding of the purity of the upland supplies is further ensured by the regular and frequent inspection of the gathering ground and by particular attention to the health of the workmen and fishermen on the reservoir.

The distribution system is mainly by gravity but there is a Booster at Beast Banks to improve the pressure in the Greenside area. There is a service reservoir fed from Fisher Tarn at Bolefoot, Oxenholme, with a capacity of 30,000 gallons.

There are only 45 houses in the Borough which do not obtain their water from the Corporation mains, 13 of these are connected to the Thirlmere aqueduct, and the remainder are served by wells and surface water private installations.

I have no official knowledge of the quantity or quality of the private water supplied.

I am indebted to the Water Engineer for furnishing the technical data in this section.

#### **Provision of Baths and Sinks.**

The 1951 census showed that your Borough held 5,651 households, of whom 1,506 had no fixed bath. That means about 26 %.

Only 6 % were without either a kitchen sink of their own or the doubtful pleasure of sharing one.

### **SEWERAGE.**

#### **Water Carriage.**

*Public Health Act, 1936. Section 47.*

Almost all the houses in Kendal are fitted with waterborne sanitation. There are 56 trough closets ; 16 privies and 4 pail closets still linger on.

#### **Public Conveniences.**

*Public Health Act, 1936. Section 87.*

Public conveniences fairly well serve the centre of the town. Proper supervision of conveniences is difficult and they have suffered much wanton damage by hooligans.

New conveniences were provided at the Market Hall to serve the Stricklandgate car park, and your Council were considering enlarging the premises on the New Road. The long distance bus passengers are still left in much discomfort in Sandes Avenue.

#### **Sewerage System.**

*Public Health Act, 1936. Section 14.*

Most of the Borough is served by the public sewers, but about 150 houses remain dependent upon cesspools. Some of the sewers are overloaded and require enlargement. Certain ancient drains communicate with surface water channels and cause occasional pollution of the river by crude sewage. These are being remedied as they are discovered.

#### **Sewage Disposal.**

*Public Health Act, 1936. Section 15.*

Sewage disposal is carried out at Wattsfield in the south of the Borough. These works were opened in 1909 with extensions in 1919-20, and comprise coarse screens with detritus tanks, whence it is carried by



rotating distributors to circular filter beds. It is then passed through humus tanks before being discharged into the River Kent. The effluent has been satisfactory in quality.

Sludge is pumped on to drying beds on the adjacent land, and special treatment is given to the gasworks liquor. There are adequate storm-water tanks.

The average dry weather flow of crude sewage dealt with at the works is 1,050,000 gallons per day. The plant is under the control of the Borough Engineer and has at all times been operated efficiently and without nuisance—a high tribute to any sewage disposal works.

### **New Sewerage.**

New sewerage was laid for the development of the Hallgarth Estate.

## **PUBLIC CLEANSING.**

### **Refuse Collection.**

*Public Health Act, 1936. Section 72.*

With a very few exceptions in the remote parts of the Borough there is a weekly removal of refuse carried out under the supervision of the Chief Sanitary Inspector. 1007 houses have been added since 1945.

### **Refuse Disposal.**

*Public Health Act, 1936. Section 76.*

Controlled tipping on a central site at Castle Grove continued on land owned by Messrs. Somervell Brothers, which will make a sports field on completion in about three more years.

No serious complaints were received from local residents, but it is obviously unpleasant to have a refuse tip so near a built up area, and when a new site is required in a few years' time I consider that a more secluded position should be chosen preferably outside the Borough. In the days of horse and cart removal it was necessary to maintain a tip in the town but the introduction of motor transport leaves little excuse for continuing to live almost on top of one's own midden.

Covering material is becoming harder to get, and the efficiency of tipping would be much improved by mechanised equipment for consolidating the refuse and shifting the soil.

Refuse from the slaughterhouse, fish shops and greengrocers is buried in deep pits at Wattsfield.

### **Salvage of Waste Material.**

*Salvage Recovery Order, 1949.*

Salvage of waste materials was continued during the year. So long as suitable materials are put out for collection and can easily be sorted it may be economical and a fire safeguard to continue their salvage and sale.

### **Canal Head Depot.**

A series of derelict buildings at Canal Head are allocated for paper salvage, bin storage, vehicle garaging and staff toilets and messroom. Most of them are in a deplorable state and I am ashamed that our Health Department should have to countenance our staff going on working there year after year.

### **Street Cleansing.**

*Public Health Act, 1936. Section 77.*

The main streets are maintained by the staff of the Borough Engineer. The open-air markets cause considerable work but the general appearance of the roads is good. Quite another picture is seen in many of the yards lying behind the main frontage to which the annual reports of my predecessors for the past 50 years have drawn attention.

## **FOOD AND DRUGS.**

### **General Powers.**

*Food and Drugs Act, 1938. Section 65.*

Your Council bear most of the statutory responsibility for safeguarding the public from foodborne diseases. The main aim is directed towards securing proper and hygienic conditions for the manufacture, preparation and sale of food. The secondary aim is to trace and localise any outbreaks of disease which may occur in spite of preventive measures.

### **Precautions against Contamination.**

*Food and Drugs Act, 1938. Section 13.*

Food hygiene is steadily improving throughout your area. Public opinion is well ahead of the law and most traders are aware of the fact. The good food trader does not need official instruction in basic cleanliness or the enforcement of legal minimum standards. He may welcome advice on technical problems, but his aim is now high he can get, not how low he can get away with.

We have now passed the stage of educational approach. A small minority of food traders have remained untouched by years of hygienic propaganda, unmoved by conscience, and unwilling to believe that the law need apply to them as they pursue their unsweet ways. They hoard masses of filthy junk in their food stores, cling on to ancient stocks of rotting food, tolerate disgusting staff toilets and even have the effrontery to appear before their customers in dirty and greasy overalls. I repeat that the bad traders are now only a very small minority, and they are being dealt with in no uncertain fashion whenever they are reported.

During the year 10 formal cautions were issued in particularly bad cases in your area, warning them of their last chance to avoid prosecution by bringing their food premises up to at least the legal minimum.

Very few food traders or caterers have taken up my challenge for them to invite their customers to look behind the scenes. It is done with pride by the shipping companies on most of the sea-going liners and I hope that we are not ashamed to do the same on land. It would have a magnificent advertisement value, and the public would be left to draw their own conclusions about the others. A clean kitchen and clean staff are far more important than fancy titivations in the dining room. Every customer should feel confident that the food he eats is safe and has been safely prepared. He has a right to be so protected and your Council are the guardians of that right.

The responsibility for safe food does not rest entirely with the trader as the housewife must play her part as well. Quite a lot of strange things happen to food between the shop counter and the dinner plate, and the educational campaign has had to be carried into the home. Every link in the chain of infection must be remembered ; that chain hangs as a symbol over every water closet in the district. Personal hygiene is the keynote, whether it be fostered by posters or propaganda or taught to the children in simple nursery jingles. Foodborne diseases, mild dysenteries and attacks of diarrhoea and vomiting are not infrequent in our homes and among our visitors. I am confident that high standards will reduce these preventable diseases.

### **Ice Cream Trade.**

*Food and Drugs Act, 1938. Section 14.*

*Ice-Cream (Heat Treatment, etc.) Regulations, 1947.*

Manufacture by hot mix, cold mix, storage and sale	...	3
Manufacture by cold mix, storage and sale	... ..	3
Storage and sale only	... ..	65



During the year 35 visits of inspection were made to ice-cream preparing premises. On the whole the position is reasonably satisfactory.

### **Prepared Meats.**

*Food and Drugs Act, 1938. Section 14.*

The number of premises on the register under Section 14 of the Food and Drugs Act, 1938, used for the preparation of sausages, potted meat, preserved meat, pressed meat and pickled foods, was 31 at the year end. No particular difficulties have been encountered in these trades.

### **Registration of Milk Distributors and Dairies which are not Dairy Farms.**

*Milk and Dairies Regulations, 1949.*

Total number of registered Distributors	...	...	...	30
---	-----	-----	-----	----

Total number of registered Dairies	...	...	...	7
------------------------------------	-----	-----	-----	---

During the year 247 visits were made under this regulation. The retail distribution of loose milk by the obsolescent jug and hand-can still lingers on as an unsatisfactory feature from the point of view of public health.

### **Cleanliness of Milk.**

*Food and Drugs Act, 1938. Section 68.*

#### **Designated Milks.**

80 samples of designated milk were taken during the year, including 11 pasteurised milks; 4 of these samples were unsatisfactory.

These tests reflected some improvement in the cleanliness and keeping quality of milk. Transport and delivery delays are factors which foster bacterial multiplication in milk but your Council is primarily interested in the actual consumer, who pays extra for the higher cleanliness of designated milk.

#### **Undesignated Milk.**

12 samples of undesignated milk were examined for cleanliness and keeping quality during the year. 11 of these were up to the standard of designated milk.

The improvement of last year has been continued and this achievement is praiseworthy because the standard of designated milk is irrationally applied to undesignated milks, and it reflects improved care at all stages between the cow and the consumer.

### **Pathogenic Organisms in Milk.**

*Food and Drugs Act, 1938. Section 68.*

No samples were examined biologically in guinea pigs for the presence of tuberculosis organisms.

It was not necessary during the year to stop any milk supply or restrict activities of any milk handlers under the Milk and Dairies Regulations on account of infectious disease.

### **Designated Milk Licences.**

*Milk (Special Designation) Regulations.*

Your Borough Council is responsible for the granting of dealers and supplementary annual licences for the sale of designated milks. At the year end 25 dealers' licences for tuberculin tested milk and one supplementary licence for pasteurised milk were in force.

### **Licensed Slaughter-houses and Knackers' Yards.**

*Food and Drugs Act, 1938. Sections 57-61.*

The only slaughter-house is the public abattoir at Sandylands. There are no licensed knackers' yards.

Casualty animals are slaughtered in the same abattoir, but the Ministry of Agriculture has again co-operated by sending animals for slaughter under the Tuberculosis Order as far as possible on days when little or no killings were taking place. Many of these animals sent in by farmers and dealers have very little food value.

On 5th July, 1954, the Government released the meat trade from the control of the Minister of Food and returned it to private enterprise, and your Council had then to consider the future use of their public abattoir. The adjoining Districts asked that the Kendal facilities should continue to serve their needs and agreed to contribute towards the cost of meat inspection and certain structural improvements.

Experience showed that the lairage for live animals awaiting slaughter is quite inadequate for the trade, and your Council decided to enlarge the accommodation.

New pig lairage was constructed in 1955, but that for cattle and sheep was still in the preparatory stage. Almost the whole time of one sanitary inspector is needed for meat inspection.

### **Slaughtering of Animals.**

21,170 animals were slaughtered during 1955 and were inspected by the department. This figure included :—

Beasts	...	...	...	...	...	3,285
Sheep	...	...	...	...	...	148
Calves	...	...	...	...	...	13,256
Pigs	...	...	...	...	...	4,482

**Condemnation of Meat at the Abattoir.***Food and Drugs Act, 1936. Section 10.*

The following is a summary of carcasses inspected and condemned in whole or in part :—

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ...	1,858	1,327	148	13,256	4,482
Number Inspected ... ..	1,858	1,327	148	13,256	4,482
All diseases except Tuberculosis and Cysticeri :					
Whole carcasses condemned ...	3	10	11	19	6
Carcase of which some part or organ was condemned...	(a) 61	(a) 70	1	(b) 42	232
Percentage of number in- spected affected with dis- ease other than tuber- culosis and cysticeri ...	3.4	6	8.1	0.5	5.3
Tuberculosis only :					
Whole carcasses condemned ...	3	1	—	—	—
Carcasses of which some part or organ was condemned ...	39	45	—	—	56
Percentage of the number inspected affected with tuberculosis ... ..	2.3	3.4	—	—	1.2
Cysticercosis :					
Carcasses of which some part or organ was condemned ...	3	1	—	—	—
Carcasses submitted to treat- ment by refrigeration ...	3	1	—	—	—
Generalised and totally con- demned ... ..	—	—	—	—	—

NOTES :—

(a) The following are not included in these figures : 694 livers and 1,414 part livers, condemned for distomatosis, cavernous angiona, etc., no distinction of sexes being kept. Also 606 intestines condemned for enteritis, parasites, etc., comprising Cows 335, Heifers 112, and Steers 159.

(b) Not included in these figures are 801 livers infested with parasites.



ANALYSIS OF MEAT CONDEMNATIONS.

Class	Number Killed	Condemnations			
		Total Carcases Condemned	Tuberculosis		Other Causes
			Total Carcases	Portions	Total Carcases
Beasts ...	3,285	17	4	88	13
Sheep ...	13,256	19	—	—	19
Calves ...	148	11	—	—	11
Pigs ... ..	4,484	6	—	56	6
Total ... ..	21,173	53	4	144	49

Tuberculosis detected.

46	cases out of	1,327	cows	...	...or	3.5%
10	„ „ „	819	heifers	...	... „	1.2%
32	„ „ „	1,131	steers	...	... „	2.8%
0	„ „ „	7	bulls	...	... „	—
0	„ „ „	148	calves	...	... „	—
0	„ „ „	13,256	sheep	...	...	—
56	„ „ „	4,482	pigs	...	... „	1.2%

Westmorland became part of a Tuberculosis Eradication Area in March, 1955 and it was found during the year that local cattle were practically free from the disease. The few cases that were detected being mainly in cattle brought from other parts of the country.

All condemned meat is stained with an indelible dye and is salvaged for conversion into animal and poultry foods. No instances have been brought to notice of pets' food being purchased for human consumption. A warning is necessary in the handling of such foods ; care must be taken to keep all utensils and preparation benches separate from human food, and careful washing of the hands after handling pets' food is advised to prevent contamination from infected meats.

### Condemnation of Other Foodstuffs.

*Food and Drugs Act, 1938. Sections 10-12.*

The following foodstuffs were condemned in shops and warehouses :—

#### Tins.

Meat	...	...	...	300	Milk	...	...	...	175
Fish	...	...	...	50	Frozen Egg	...	...	...	13
Fruit	...	...	...	416	Cream	...	...	...	12
Vegetables	...	...	...	330	Pudding	...	...	...	1
Soup	...	...	...	42					

#### Jars.

Cherries	...	...	...	1	Salmon Spread	...	...	...	1
Pickles	...	...	...	13	Potted Chicken	...	...	...	1
Jam	...	...	...	34	Tongue Paste	...	...	...	2
Honey	...	...	...	2	Bilberries	...	...	...	1

#### Packets and Cartons.

Semolina	...	...	...	12	Cereals	...	...	...	64
Cheese	...	...	...	25	Jellies	...	...	...	12
Ice Cream...	...	...	...	42	Welsh Rarebit	...	...	...	1
Glace Cherries	...	...	...	11					

#### Miscellaneous.

Bacon	...	...	286 lbs.	Fish Cakes	...	...	...	36
Biscuits	...	...	19½ lbs.	Garden Mint	3 bottles (26 oz.)			
Butter	...	...	19 cwt.	Ham	...	...	404½ lbs.	
Cereals	...	...	67 lbs.	Margarine	...	...	½ lb.	
Cheese	...	...	65¾ lbs.	Mushrooms	...	...	3 lbs.	
Coconut	...	...	5 lbs.	Rum Butter	...	...	216 lbs.	
Cooking Fat	...	...	26½ lbs.	Sausages	...	...	23 lbs.	
Custard Powder	...	...	14 lbs.	Tomatoes	...	...	39 lbs.	
Cydrax	...	...	3 qts.	Tomato Ketchup	...	...	1 bottle	
Dried Fruit	...	...	26¾ lbs.	Yeast	...	...	51 lbs.	
Eggs	...	...	331 doz.	Assorted Confectionery	...	...	25 lbs.	
Fish	...	...	412 lbs.					

### Method of Disposal of Condemned Food.

The Minister of Health requires me to describe the current methods for the disposal of condemned food. In this District it is by burial at Wattsfield.

## GENERAL SANITARY INSPECTION.

### Establishment.

The establishment of the Sanitary Department was one Chief Sanitary Inspector, two Additional Inspectors and one Clerk. The strength of the department was maintained during the year.

### Organisation.

The Chief Sanitary Inspector had, of necessity, considerable administrative duties in the running of his department, the preparation of material and attendance at your Committees, and his availability for outside duties was restricted. This is the usual position in most authorities.

The Second Inspector was mainly engaged on general duties outside the office in connection with the execution of your statutory responsibilities.

The Third Sanitary Inspector spent the greater part of his time at the abattoir on meat inspection, and the balance on general sanitary inspection.

The Clerk assists by relieving the burden of office work from the technical staff. It is desirable that the time of the technical staff should not be dissipated on clerical duties, but a certain amount of office work can be done only with that technical knowledge.

Cemeteries administration constituted a measure of misemployment, and I hope that at some future date it may be transferred to a more appropriate department of your Corporation.

Impending legislation suggests that many extra burdens will be imposed upon the department in the near future, and some extra help may be needed.

The tabulated summary of the work of the Sanitary Inspectors provides some indication of the time spent on the multifarious duties of the department, the more theoretical aspects of which you have studied in this entire Annual Report :—

Inspection of dwellings...	...	...	...	...	705
„ „ yards	...	...	...	...	310
Visits to Public Slaughterhouses	...	...	...	...	781
„ „ Offensive Trades	...	...	...	...	62
Inspections of Common Lodging Houses	...	...	...	...	11
„ in connection with Milk Distribution	...	...	...	...	247
Stables and Piggeries	...	...	...	...	12
Refuse Disposal and Salvage	...	...	...	...	349
Drainage Works	...	...	...	...	85



Works in Progress	...	...	...	...	...	126
Bakehouses	...	...	...	...	...	23
Food Premises	...	...	...	...	...	155
Ice Cream Premises	...	...	...	...	...	35
Factories and Workshops	...	...	...	...	...	101
Tents, Vans and Sheds	...	...	...	...	...	25
Shops Acts	...	...	...	...	...	42
Miscellaneous	...	...	...	...	...	78
Complaints	...	...	...	...	...	249
Drains Tested	...	...	...	...	...	6
Drains Inspected	...	...	...	...	...	22
Disinfestation Visits	...	...	...	...	...	420
Housing Management	...	...	...	...	...	79
Condemned Property	...	...	...	...	...	61
Smoke Abatement	...	...	...	...	...	39
Overcrowding	...	...	...	...	...	15
Schools	...	...	...	...	...	19
Spouts	...	...	...	...	...	12
Infectious Diseases	...	...	...	...	...	135
Cinemas	...	...	...	...	...	6
Licensed Premises	...	...	...	...	...	25
Mortuary	...	...	...	...	...	12
Pests Act	...	...	...	...	...	190
Burial Grounds	...	...	...	...	...	110
						<hr/> 4,547 <hr/>

### Offensive Trades.

*Public Health Act, 1936. Section 107.*

The carrying out of the following offensive trades in the Borough has not given rise to any undue nuisance.

Fellmonger	...	...	...	...	...	1
Carcase Boilers	...	...	...	...	...	2
Tallow Melter	...	...	...	...	...	1
Tripe Boiler	...	...	...	...	...	1
Gut Scraper	...	...	...	...	...	1
Rag and Bone Dealer	...	...	...	...	...	2

### Factories.

*Factories Act, 1937.*

The duties and responsibilities of your Council are not being fully carried out for the staffing reasons to which I have already referred, although much leeway has been made good.

**Inspections.**

Premises	Number of Premises	Number of		
		Inspection	Written Notices	Occupiers Prosecuted.
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	191	101	—	—
Factories not included in (1), in which Section 7 is enforced by the Local Authority ... ..	—	—	—	—
Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises.) ... ..	—	—	—	—
TOTAL ... ..	191	101	—	—

No defects were found.

There are 191 factories on the register. 101 inspections were made and no written notice served. No references were made to H.M. Inspector and none were received from him.

One outworker was notified to your Council by factory owners.

There are no recognised basement bakehouses in the Borough.

No certificates were issued approving the means of escape in case of fire in a factory.

Form 572 (revised) was sent directly to the Minister of Labour and National Service, giving details of the Borough Council's administration of the relevant sections of Parts I and VIII of the Factories Act, 1937, in accordance with Section 127 of that Act.

**Shops Act, 1950.**

42 visits were made under the Shops Act for the supervision of sanitary accommodation, washing facilities and the maintenance of suitable temperatures.

**Common Lodging Houses.**

*Public Health Act, 1936. Part IX.*

Only one common lodging house at Waterside remains on the register ; 11 visits were paid during the year.

### **Rent Restriction Acts.**

No cases arose in connection with rent restriction. Several cases were noticed when the necessary entries prescribed by the Housing and Rent Restriction Acts were not entered in rent books. All these were rectified upon the department's intimation to the agents or landlords.

### **Smoke Abatement.**

*Public Health Act, 1936. Sections 101-106.*

39 visits were paid in connection with smoke abatement. The nuisance at the Gas Works has been abated. Another boiler was changed from bituminous coal to smokeless fuel with success. A Clean Air Bill was before Parliament at the year end.

### **Laboratory Services.**

*National Health Service Act, 1946. Section 17.*

The Laboratory attached to Westmorland County Hospital in Kendal provided many of the necessary examinations of material obtained by the department. This laboratory has given extremely valuable service to the southern part of the County.

### **National Assistance Act, 1948.**

*Section 47—Compulsory Removal.*

Two cases were under review, but alternative means were still keeping the patients in their own homes at the year end.

Such cases are extremely distressing to deal with and the course of compulsory removal is reserved to meet the emergencies of a last resort when all other methods of help have failed. Sometimes it is very hard to decide what is really in the best interests of the patient.

### **Pests Act, 1949.**

During the year 268 premises were surveyed under the provisions of the Act. 44 premises were found to be infested by rats or mice and were treated by the Department.

54 complaints of rats or mice were received during the year. A systematic survey was commenced during 1955. One section of the sewers were treated successfully, and tests on other lengths were satisfactory.



**Pet Animals Act, 1951.**

This leaves 2 shops licensed. No particular difficulties were encountered in supervision.

**Byelaws.**

Byelaws on public health matters are in force with regard to :—

Public Slaughterhouses.

Smoke Abatement.

Building.

Food Handling.

**New Legislation.**

No new legislation came into force during the year.

**APPENDIX "A"****Laboratory Examination of Public Water Supplies.**

Nature of Test	Standards Max.	Fisher Tarn	Birds Park	Mints Feet
<i>Pr. coli</i> count 37° ... ..	3-10	4	0	12
Faecal coli/strep ... ..	0	0		0
Character ... ..	—	Clear	Clear	Clear
Reaction ... ..	—	6.9	6.7	6.6
Ammonical Nitrogen ... ..	.041	.01	.01	.01
Albuminoid Nitrogen ... ..	.066	.02	.01	.03
Total Solids ... ..	1000	56.8	60	109.6
Hardness { Total ... ..	300	30	43	83
{ Carbonate ... ..	—	—	—	—
{ Non-Carbonate ... ..	—	—	—	—
Chlorides ... ..	30	11.5	12.0	9.0
Nitrates ... ..	1	0	0	0
Nitrites ... ..	—	0	.2	.9
0.2 Absorbed ... ..	1	.85	.38	.13
Heavy Metals ... ..	—	—	—	—
Rainfall (24 hours) ... ..	—	.05"	.05"	.05"
Date Sampled ... ..	—	26/1/55	26/1/55	26/1/55
Laboratory ... ..	—	Liverpool	Liverpool	Liverpool

Chemical analyses expressed in parts per million.







